W

BOROUGH OF DUNSTABLE



ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1970

Medical Officer of Health

D.S.JOSEPHS, M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.H.

Digitized by the Internet Archive in 2017 with funding from Wellcome Library

His Worship the Mayor, Aldermen and Councillors of the Borough of Dunstable
Ladies and Gentlemen;

I have the honour to submit my Annual Report on the health and sanitary circumstances of the Borough during 1970, a period in which my predecessor, Dr.H.A.A.Pargeter, held office. I am certain that the Members will join with me in thanking Dr.Pargeter for his long service to Dunstble and I must also thank him for his help in introducing me to my new duties.

During 1970 there was no major outbreak of infectious disease, but it should be noted that measles notifications do not yet show any decline despite the ready availability of vaccine. It is to be hoped that 1971 will mark a turning point with regard to measles, the complications of which not infrequently cause prolonged disability and can even kill an ailing child.

The "smoking diseases" now pose the greatest challenge to preventive medicine in developed countries and an article on this subject appears in the report.

Once again the stillbirth and infant mortality rates for the Borough stand up well to comparison with the rest of Bedfordshire and with the figures for England and Wales.

I am grateful to Members of the Council for the consideration they have shown to me and particularly to Mr.H.Stew, Dr.M.C.Macleod and Dr.E.E.Henderson for all their assistance and advice.

I am,

Your obedient servant,

D.S.Josephs
Medical Officer of Health

STATISTICS OF THE AREA

STATISTICS OF THE AREA						
Area (in acres) census	1961			2	2,092	
Population:						
Census for 1961				2.5	6,645	
Registrar General's		e of hom	ne			
population mid-	year 1970			30	,000	
VITAL STATISTICS						
	Live Bir	ths				
Legitimate				Female		
Illegitimate			349 19	287 _16	636 35	
	Totals		368	303	671	
Crude Birth Rate Adjusted Birth Rate (The compare hility feater for	22.4 per 19.3 "	11	11	11		
(The comparability factor for As compared with Adjusted Rate for Bedfordshin Rate for England and Wales	ce 17.7 pe				on	
do to	Still Bin	rths				
T = a factor a			Male	Female		
Legitimate Illegitimate			1 -	2 1	3 1	
	Totals		1	3	4	
Still Birth Rate	6 p.	er 1.000	total	(live a	nd stil	l births)
As compared with	v po	2,000	50641	(IIVE a	ing Serr	r orrens)
Rate for Bedfordshire Rate for England and Wales	8.7 ' 13 '		†† ††			
	Deaths		36 1	27 1	m . 1	
Deaths in the District			<u>Male</u> 56	Female 62	Total	
Transferred into the District			84	68	118 152	
Transferred from the District			4	8	12	
	Totals		136	122	258	
Crude Death Rate Adjusted Death Rate (The comparability factor for	11.5	11 11	11	populat " 34)	ion	
As compared with						
Adjusted Rate for Bedfordshir Rate for England and Wales	te 10.2 p 11.7	per 1,00	O home	populat "	ion	
	Deaths of	Infant				ge
т			Male	Female 5	Total	-
Legitimate Illegitimate			3	5	8	
	Totals		3	5	8	
Infant Mortality Rate	12 per	1,000	relate	d live b	irths	
As compared with	15.0	11	11	11	11	
Rate for Bedfordshire Rate for England and Wales	15.9 18	11	11	11	11	
	Deaths Connected with Childbirth					

Maternal Mortality there was 1 maternal death

Total Under all 4
ages weeks
M F M
1 1 1
2 2
1 3
1/ 2 -
7 ,
1 ,
7 2 -
- - - -
1 1
ا ا
2
1 2 -
39 25 -
2 8 -
13 30 -
1
1 2 -
2
1 -
1 1
1 1
1 1 1
- 71 -
2 2 2
2
3 3
1 4 -
136 122 3
20 125

SMOKING AND HEALTH

It is the duty of the Medical Officer of Health to identify preventable illness in his district, particularly that which is responsible for extensive disability and premature death.

Cigarette smoking has become by far the largest single avoidable cause of death in the United Kingdom. It is believed to be responsible for nine out of ten deaths from lung cancer, three out of four deaths from chronic bronchitis and one out of four deaths from coronary artery disease. Smoking probably causes as many as twenty working days to be lost through sickness for every one lost as a result of industrial dispute.

The Chief Medical Officer at the Department of Health and Social Security has recently declared "There is no other agent in our environment which approaches the cigarette in menace to health and life".

Examination of the table of Causes of Death during 1970, reveals that twenty-seven Dunstable residents, aged between twenty-five and sixty-four, died as a result of lung cancer, coronary artery disease or chronic bronchitis. Thirteen of these young and middle-aged people would probably still be alive were it not for the smoking habit.

Put another way, smoking killed at least 13 out of 63 people who died in Dunstable Borough before reaching retirement age. Road accidents were responsible for only 3 of these deaths.

Smoking plays an important, though smaller part, in the causation of several other diseases and it may well be that the real toll from the habit amounted to as much as a quarter of all premature deaths during 1970.

With relatively small numbers there is always a risk of statistical error, but this is unlikely to be affecting the picture substantially since the 1970 figures do not differ greatly from those for the previous four years.

The Royal College of Physicians, in their recent report "Smoking and Health Now", urge health authorities to consider means of countering this scourge. Public disapproval of a habit that upsets many non-smokers must be promoted. Much depends on action at Central Government and County Council level, but the "Report" suggests two measures that could be taken locally in Dunstable.

"Most children obtain their cigarettes from shops; but one in five of the younger children who smoke get them from vending machines. Further consideration should be given to strengthening and extending the regulations that forbid the selling of cigarettes to children and the abolition of all cigarette vending machines in public places.

This would not only make it less easy for children to acquire cigarettes but would also show that the community is determined to discourage young people from starting a dangerous habit."

The question of smoking in public places is controversial but the District Council might wish to consider discouraging smoking in its own premises. A good example by the local authority might be followed by retail stores and other privately owned establishments.

INFECTIOUS DISEASES

(a) Notifications by Age Group

Disease	0-4	5-14	15 and over	Age unknown	Total
Measles	128	68	4 4	2	202
Infective jaundice	1	11	10	1	23
Scarlet fever	2	8	-	-	10
Whooping cough	3	3	-	9	6
Paratyphoid feter	1	-	2	-	3
Food poisoning	-	1	1	-	2
Dysentery	1	-	-		.2

(b) Tuberculosis

1	5	Tuberculosis in	Age Groups		
100	New	cases	Deaths		
Age	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	
	M F	M F	M F	M F	
Under 1 year					
1 - 5 years					
5 - 15 years				- ,: -	
15-35 years			_	-	
35-65 years					
Over 65 years	1 -	- 1			

Number on Register at End of Year

	Malee	Female
Pulmonary	21	13
Non-Pulmonary	2	1

MASS RADIOGRAPHY

Totals

A mobile x-ray unit, provided by the Mass Radiography Service of the Regional Hospital Board, visits Dunstable on Wednesday afternoons from 2.45 to 3.15 p.m. and during this period patients sent by general practitioners can be x-rayed.

CLEANSING OF VERMINOUS PERSONS

Section 85 of the Public Health Act 1936 refers principally to school children with head lice infestations and these are dealt with by the Health Visitors as a matter of routine.

NATIONAL ASSISTANCE ACT 1948 - Section 47

1.

Section 47 of the National Assistance Act provides for the removal to hospital or Part III accommodation on a Court Order of sick or old people who are unable to look after themselves.

It was not found necessary to use this legislation for the compsulory removal of any persons during the year.

